

United States Bankruptcy Court for the:

District of Nevada

Case number (if known): _____

Chapter you are filing under:

- ☐ Chapter 7
☒ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an
amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name TRIDENT HOLDINGS, LLC

2. All other names debtor used
in the last 8 years

Include any assumed names,
trade names, and *doing business*
as names

3. Debtor's federal Employer
Identification Number (EIN) 84-4202620

4. Debtor's address

Principal place of business

5580 W DESERT INN RD

Number Street

LAS VEGAS NV 89146

City State ZIP Code

Clark County

County

Mailing address, if different from principal place
of business

Number Street

P.O. Box

City State ZIP Code

Location of principal assets, if different from
principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

6. Type of debtor

- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify: _____

Debtor TRIDENT HOLDINGS, LLC Case number (if known) _____
 Name _____

7. Describe debtor's business*A. Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

*C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.*See <http://www.naics.com/search/>.5310**8. Under which chapter of the Bankruptcy Code is the debtor filing?***Check one:*

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. *Check all that apply:*

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☐ No

☒ Yes. District Nevada When 03/16/21 Case number 21-11260-NMC
 MM / DD / YYYY
 District _____ When _____ Case number _____
 MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☒ No

☐ Yes. Debtor _____ Relationship _____
 District _____ When _____
 Case number, if known _____
 MM / DD / YYYY

List all cases. If more than 1, attach a separate list.

Debtor TRIDENT HOLDINGS, LLC Case number (if known) _____
 Name _____

11. Why is the case filed in *this* district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
 What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____

Where is the property? _____

Number Street

City State ZIP Code

Is the property insured?

- ☐ No
- ☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated assets

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor TRIDENT HOLDINGS, LLC Case number (if known) _____
 Name _____

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/07/2021
 MM / DD / YYYY

X /s/ JAMES RONALD CLARK

Signature of authorized representative of debtor

JAMES RONALD CLARK

Printed name

Title MANAGING MEMBER

18. Signature of attorney

X /s/ David Riggi

Signature of attorney for debtor

Date 10/07/2021
 MM / DD / YYYY

David Riggi

Printed name

Riggi Law

Firm name

5550 Painted Mirage Road Suite 320

Number Street

Las Vegas

City

NV 89149
 State ZIP Code

702-463-7777

Contact phone

riggilaw@gmail.com
 Email address

4727

Bar number

NV
 State

CERTIFICATE OF RESOLUTIONS

James Ronald Clark, Robert Tanko, Mark Miyaoka, and Rick Saga, each a managing member of **TRIDENT HOLDINGS LLC**, a Nevada limited-liability company (“Company”), and such managing members comprising all members of the Company, hereby certify that at a special meeting held on October 6, 2021, the following resolutions were adopted and that these resolutions have been neither modified nor rescinded and each remain in full force and effect as of execution of this Certificate of Resolutions:

RESOLVED, that in the judgment of the Company, its manager, and its member, it is desirable and in the best interests of the Company, its creditors, and other interested parties that a petition be filed by the Company seeking relief under the provisions of Chapter 11 of Title 11 of the United States Code (“Bankruptcy Code”);

RESOLVED, that James Ronald Clark (himself or his designee being an “Authorized Person” and all being the “Authorized Persons”) are hereby authorized, empowered, and directed, in the name of and on behalf of the Company to execute and verify a petition and any amendments thereto under Chapter 11 of the Bankruptcy Code (“Chapter 11 Case”) and to cause the same to be filed in the United States Bankruptcy Court, District of Nevada (“Bankruptcy Court”), at such time as the Authorized Person executing the same shall determine;

RESOLVED, that the RIGGI LAW FIRM and David A Riggi, Esq. (“Firm”) is engaged and shall continue its engagement as attorneys for the Company in the Chapter 11 Case as general restructuring counsel, subject to certain approvals required by the Firm to be obtained from the Bankruptcy Court;

RESOLVED, that each Authorized Person, and such other persons as an Authorized Person may from time to time designate, and any employees or agents designated by or directed by any such Authorized Person, including counsel, be, and hereby are, authorized, empowered, and directed, in the name and on the behalf of the Company, to execute and file all petitions, schedules, motions, lists, applications, adversary proceedings, claim objections, plans, pleadings, and other papers, and to take and perform any and all further acts and deeds which he or she deems necessary, proper, or desirable in connection with the Chapter 11 Case, with a view to the successful prosecution of the same;

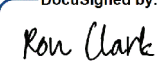
RESOLVED, that each Authorized Person, and such other Persons as an Authorized Person may from time to time designate, and any employees or agents designated by or directed by any such Authorized Person, including counsel, be, and hereby are, authorized, empowered, and directed, in the name and on the behalf of the Company, to cause the Company to enter into, execute, deliver, certify, file,

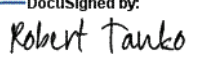
DS DS DS DS
RC RT mm RS

record, and perform such agreements, instruments, motions, affidavits, declarations, applications, certificates, and other documents, and to take such other action as in the judgment of such person shall be or become necessary, proper, and desirable to effectuate a successful reorganization of the Company through Chapter 11 of the Bankruptcy Code; and

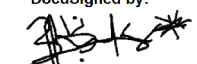
RESOLVED, that any and all past actions taken by any Authorized Person of the Company in the name and on behalf of the company in furtherance of any or all of the proceeding resolutions be, and the same hereby are, ratified, confirmed, and approved.

IN WITNESS WHEREOF, I have executed this Certificate of Resolutions this 6 day of October, 2021.

By: 
EE4E1D306E14454...
James Ronald Clark,
Managing Member

By: 
33825BAF25C0444...
Robert Tanko,
Managing Member

By: 
2F9BCCF89F46429...
Mark Miyaoka,
Managing Member

By: 
C93AB4C3D1624FE...
Rick Saga,
Managing Member

Form 1065 Department of the Treasury Internal Revenue Service	U.S. Return of Partnership Income For calendar year 2020, or tax year beginning _____, ending _____ Go to www.irs.gov/Form1065 for instructions and the latest information.	OMB No. 1545-0123 2020															
A Principal business activity REAL ESTATE B Principal product or service INVESTMENT C Business code number 531390	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="5" style="width:5%; text-align: center; vertical-align: middle;">Type or Print</td> <td colspan="3">Name of partnership TRIDENT HOLDINGS LLC (NV)</td> </tr> <tr> <td colspan="3">Number, street, and room or suite no. If a P.O. box, see instructions. 5580 W DESERT INN RD</td> </tr> <tr> <td>City or town Las Vegas</td> <td>State NV</td> <td>ZIP code 89146</td> </tr> <tr> <td colspan="2">Foreign country name</td> <td>Foreign province/state/county</td> </tr> <tr> <td colspan="2">Foreign postal code</td> </tr> </table>	Type or Print	Name of partnership TRIDENT HOLDINGS LLC (NV)			Number, street, and room or suite no. If a P.O. box, see instructions. 5580 W DESERT INN RD			City or town Las Vegas	State NV	ZIP code 89146	Foreign country name		Foreign province/state/county	Foreign postal code		D Employer identification number 82-4202620 E Date business started 1/29/2018 F Total assets (see instructions) \$ 0
Type or Print	Name of partnership TRIDENT HOLDINGS LLC (NV)																
	Number, street, and room or suite no. If a P.O. box, see instructions. 5580 W DESERT INN RD																
	City or town Las Vegas		State NV	ZIP code 89146													
	Foreign country name		Foreign province/state/county														
	Foreign postal code																

G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return

H Check accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) _____

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year. _____ **6**

J Check if Schedules C and M-3 are attached. _____ ☐

K Check if partnership: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

Income	1a Gross receipts or sales	1a			
	b Returns and allowances	1b			
	c Balance. Subtract line 1b from line 1a			1c	0
	2 Cost of goods sold (attach Form 1125-A)			2	
	3 Gross profit. Subtract line 2 from line 1c			3	0
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4	
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5	
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6	
Deductions <small>(see instructions for limitations)</small>	7 Other income (loss) (attach statement)			7	
	8 Total income (loss). Combine lines 3 through 7			8	0
	9 Salaries and wages (other than to partners) (less employment credits)			9	
	10 Guaranteed payments to partners			10	
	11 Repairs and maintenance			11	
	12 Bad debts			12	
	13 Rent			13	
	14 Taxes and licenses			14	
	15 Interest (see instructions)			15	
	16a Depreciation (if required, attach Form 4562)	16a			
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b		16c	0
	17 Depletion (Do not deduct oil and gas depletion.)			17	
18 Retirement plans, etc.			18		
19 Employee benefit programs			19		
20 Other deductions (attach statement)			20		
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21	0	
22 Ordinary business income (loss). Subtract line 21 from line 8			22	0	
Tax and Payment	23 Interest due under the look-back method—completed long-term contracts (attach Form 8697)			23	
	24 Interest due under the look-back method—income forecast method (attach Form 8866)			24	
	25 BBA AAR imputed underpayment (see instructions)			25	
	26 Other taxes (see instructions)			26	
	27 Total balance due. Add lines 23 through 26			27	0
	28 Payment (see instructions)			28	
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed			29	
	30 Overpayment. If line 28 is larger than line 27, enter overpayment			30	

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member _____ Date _____

May the IRS discuss this return with the preparer shown below? See instructions. ☐ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name SUE ANN MA, CPA	Preparer's signature SUE ANN MA, CPA	Date 9/16/2021	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00585535
	Firm's name SEMINAL FINANCIAL GROUP INC.			Firm's EIN 76-0690482	
	Firm's address 7001 CORPORATE STE 100			Phone no. (713) 777-1886	
	City HOUSTON State TX			ZIP code 77036	

For Paperwork Reduction Act Notice, see separate instructions.

Form **1065** (2020)

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:				Yes	No
a <input type="checkbox"/> Domestic general partnership	b <input type="checkbox"/> Domestic limited partnership				
c <input checked="" type="checkbox"/> Domestic limited liability company	d <input type="checkbox"/> Domestic limited liability partnership				
e <input type="checkbox"/> Foreign partnership	f <input type="checkbox"/> Other ►				
2 At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership					X
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership					X
3 At the end of the tax year, did the partnership:					
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below					X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below					X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital	
4 Does the partnership satisfy all four of the following conditions?				Yes	No
a The partnership's total receipts for the tax year were less than \$250,000.					
b The partnership's total assets at the end of the tax year were less than \$1 million.					
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
d The partnership is not filing and is not required to file Schedule M-3 If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.				X	
5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?					X
6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
8 At any time during calendar year 2020, did the partnership have an interest in or a signature or other authority over financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►					X
9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions					X
10a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.					X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions					X

Schedule B Other Information (continued)

	Yes	No
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions <input type="checkbox"/>		
14 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. 0		X
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return. <input type="checkbox"/>		
16a Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions		X
b If "Yes," did you or will you file required Form(s) 1099?		
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return. <input type="checkbox"/>		
18 Enter the number of partners that are foreign governments under section 892. 0		
19 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		X
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22 During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions X If "Yes," enter the total amount of the disallowed deductions \$		
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24 Does the partnership satisfy one or more of the following? See instructions X a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the partnership has business interest. c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
25 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3. <input type="checkbox"/> If "No," complete Designation of Partnership Representative below.		X

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR ☐ RICK SAGA

U.S. address of PR <input type="checkbox"/> 5580 W DESERT INN RD Las Vegas NV 89146	U.S. phone number of PR <input type="checkbox"/> (702) 722-7117
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If the PR is an entity, name of the designated individual for the PR ☐

U.S. address of designated individual <input type="checkbox"/>	U.S. phone number of designated individual <input type="checkbox"/>
--	---

26 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 16 \$		X
27 Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership <input type="checkbox"/>		
28 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
29 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By Vote By Value		X

Schedule K		Partners' Distributive Share Items	Total amount	
Income (Loss)	1	Ordinary business income (loss) (page 1, line 22)	1	
	2	Net rental real estate income (loss) (attach Form 8825)	2	
	3a	Other gross rental income (loss)	3a	
	b	Expenses from other rental activities (attach statement)	3b	
	c	Other net rental income (loss). Subtract line 3b from line 3a	3c	0
	4	Guaranteed payments: a Services 4a 0 b Capital 4b 0	4c	
	c	Total. Add lines 4a and 4b	4c	
	5	Interest income	5	
	6	Dividends and dividend equivalents: a Ordinary dividends	6a	
	b	Qualified dividends 6b c Dividend equivalents 6c	6c	
	7	Royalties	7	
Deductions	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
	9a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b	Collectibles (28%) gain (loss)	9b	
	c	Unrecaptured section 1250 gain (attach statement)	9c	
	10	Net section 1231 gain (loss) (attach Form 4797)	10	
	11	Other income (loss) (see instructions) Type ▶	11	
	12	Section 179 deduction (attach Form 4562)	12	
	13a	Contributions	13a	
	b	Investment interest expense	13b	
	c	Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
	d	Other deductions (see instructions) Type ▶	13d	
Self-Employment	14a	Net earnings (loss) from self-employment	14a	
	b	Gross farming or fishing income	14b	
	c	Gross nonfarm income	14c	
Credits	15a	Low-income housing credit (section 42(j)(5))	15a	
	b	Low-income housing credit (other)	15b	
	c	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d	Other rental real estate credits (see instructions) Type ▶	15d	
	e	Other rental credits (see instructions) Type ▶	15e	
	f	Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16a	Name of country or U.S. possession ▶	16a	
	b	Gross income from all sources	16b	
	c	Gross income sourced at partner level	16c	
	d	Foreign gross income sourced at partnership level		
	e	Reserved for future use ▶ Foreign branch category ▶	16e	
	f	Passive category ▶ g General category ▶ h Other (attach statement) ▶	16h	
	i	Deductions allocated and apportioned at partner level		
	j	Interest expense ▶ j Other ▶	16j	
	k	Deductions allocated and apportioned at partnership level to foreign source income		
	l	Reserved for future use ▶ Foreign branch category ▶	16l	
	m	Passive category ▶ n General category ▶ o Other (attach statement) ▶	16o	
Alternative Minimum Tax (AMT) Items	p	Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16p	
	q	Reduction in taxes available for credit (attach statement)	16q	
	r	Other foreign tax information (attach statement)		
	17a	Post-1986 depreciation adjustment	17a	
	b	Adjusted gain or loss	17b	
	c	Depletion (other than oil and gas)	17c	
Other Information	d	Oil, gas, and geothermal properties—gross income	17d	
	e	Oil, gas, and geothermal properties—deductions	17e	
	f	Other AMT items (attach statement)	17f	
	18a	Tax-exempt interest income	18a	
	b	Other tax-exempt income	18b	
	c	Nondeductible expenses	18c	
	19a	Distributions of cash and marketable securities	19a	
b	Distributions of other property	19b		
20a	Investment income	20a		
b	Investment expenses	20b		
c	Other items and amounts (attach statement)			

Analysis of Net Income (Loss)

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16p						1	0
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners							
b Limited partners							

Schedule L Balance Sheets per Books

		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts		0		0
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (attach statement)				
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach statement)				
9a	Buildings and other depreciable assets				
b	Less accumulated depreciation		0		0
10a	Depletable assets				
b	Less accumulated depletion		0		0
11	Land (net of any amortization)				
12a	Intangible assets (amortizable only)				
b	Less accumulated amortization		0		0
13	Other assets (attach statement)				
14	Total assets		0		0
Liabilities and Capital					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach statement)				
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more				
20	Other liabilities (attach statement)				
21	Partners' capital accounts				
22	Total liabilities and capital		0		0

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books		6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):	0	a	Tax-exempt interest \$	0
3	Guaranteed payments (other than health insurance)	0	7	Deductions included on Schedule K, lines 1 through 13d, and 16p, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16p (itemize):		a	Depreciation \$	0
a	Depreciation \$		8	Add lines 6 and 7	0
b	Travel and entertainment \$	0	9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	0
5	Add lines 1 through 4	0			

Schedule M-2 Analysis of Partners' Capital Accounts

1	Balance at beginning of year		6	Distributions:	a Cash	
2	Capital contributed:				b Property	
	a Cash		7	Other decreases (itemize):		
	b Property					
3	Net income (loss) per books		8	Add lines 6 and 7		0
4	Other increases (itemize):	0	9	Balance at end of year. Subtract line 8 from line 5		0
5	Add lines 1 through 4	0				

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Final K-1



Amended K-1

OMB No. 1545-0123

**Schedule K-1
(Form 1065)****2020**Department of the Treasury
Internal Revenue Service

For calendar year 2020, or tax year

beginning

ending

**Partner's Share of Income, Deductions,
Credits, etc.**

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

82-4202620

B Partnership's name, address, city, state, and ZIP code

TRIDENT HOLDINGS LLC (NV)

5580 W DESERT INN RD

Las Vegas, NV 89146

C IRS Center where partnership filed return ▶ e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

Partner: 1

539-35-4021

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

RICK SAGA

5580 W DESERT INN RD

Las Vegas, NV 89146

G ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN

Name

I1 What type of entity is this partner?

Active Individual

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 34.000000% 34.000000%

Loss 34.000000% 34.000000%

Capital 34.000000% 34.000000%

Check if decrease is due to sale or exchange of partnership interest . . . ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse . \$ \$

Qualified nonrecourse

financing . . . \$ \$

Recourse . . . \$ \$

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account \$

Capital contributed during the year . . \$

Current year net income (loss) \$

Other increase (decrease) (attach explanation) \$

Withdrawals & distributions \$ ()

Ending capital account \$

M Did the partner contribute property with a built-in gain or loss?☐ Yes☒ No

If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

Part III**Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction		
13	Other deductions		
14	Self-employment earnings (loss)		
19	Distributions		
20	Other information		

21 ☐ More than one activity for at-risk purposes*22 ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

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Final K-1



Amended K-1

OMB No. 1545-0123

**Schedule K-1
(Form 1065)****2020**Department of the Treasury
Internal Revenue Service

For calendar year 2020, or tax year

beginning

ending

**Partner's Share of Income, Deductions,
Credits, etc.**

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

82-4202620

B Partnership's name, address, city, state, and ZIP code

TRIDENT HOLDINGS LLC (NV)

5580 W DESERT INN RD

Las Vegas, NV 89146

C IRS Center where partnership filed return ▶ e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

Partner: 2

263-62-7880

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

JAMES R CLARK

3619 MULBERRY HILLS DR

Kingwood, TX 77339

G ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN

Name

I1 What type of entity is this partner?

Active Individual

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 25.000000% 25.000000%

Loss 25.000000% 25.000000%

Capital 25.000000% 25.000000%

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse \$ \$

Qualified nonrecourse

financing \$ \$

Recourse \$ \$

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account \$

Capital contributed during the year \$

Current year net income (loss) \$

Other increase (decrease) (attach explanation) \$

Withdrawals & distributions \$ ()

Ending capital account \$

M Did the partner contribute property with a built-in gain or loss?☐ Yes☒ No

If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction		
13	Other deductions		
14	Self-employment earnings (loss)		
19	Distributions		
20	Other information		

21 ☐ More than one activity for at-risk purposes*22 ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

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Final K-1



Amended K-1

OMB No. 1545-0123

**Schedule K-1
(Form 1065)****2020**Department of the Treasury
Internal Revenue Service

For calendar year 2020, or tax year

beginning

ending

**Partner's Share of Income, Deductions,
Credits, etc.**

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

82-4202620

B Partnership's name, address, city, state, and ZIP code

TRIDENT HOLDINGS LLC (NV)

5580 W DESERT INN RD

Las Vegas, NV 89146

C IRS Center where partnership filed return ▶ e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

Partner: 3

071-34-8866

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

BRUCE EVAN GUNTHER

2723 GRAND FALLS DR

Kingwood, TX 77345

G ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN

Name

I1 What type of entity is this partner?

Active Individual

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 12.000000% 12.000000%

Loss 12.000000% 12.000000%

Capital 12.000000% 12.000000%

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse \$ \$

Qualified nonrecourse

financing \$ \$

Recourse \$ \$

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account \$

Capital contributed during the year \$

Current year net income (loss) \$

Other increase (decrease) (attach explanation) \$

Withdrawals & distributions \$ ()

Ending capital account \$

M Did the partner contribute property with a built-in gain or loss?☐ Yes☒ No

If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction		
13	Other deductions		
14	Self-employment earnings (loss)		
19	Distributions		
20	Other information		

21 ☐ More than one activity for at-risk purposes*22 ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

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Final K-1



Amended K-1

OMB No. 1545-0123

**Schedule K-1
(Form 1065)****2020**Department of the Treasury
Internal Revenue Service

For calendar year 2020, or tax year

beginning

ending

**Partner's Share of Income, Deductions,
Credits, etc.**

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

82-4202620

B Partnership's name, address, city, state, and ZIP code

TRIDENT HOLDINGS LLC (NV)

5580 W DESERT INN RD

Las Vegas, NV 89146

C IRS Center where partnership filed return ▶ e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

Partner: 4

428-19-2628

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

ROBERT TANKO

5580 W DESERT INN RD

LAS VEGAS, NV 89146

G ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN

Name

I1 What type of entity is this partner? Active Individual**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 2.000000% 2.000000%

Loss 2.000000% 2.000000%

Capital 2.000000% 2.000000%

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse \$ \$

Qualified nonrecourse

financing \$ \$

Recourse \$ \$

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account \$

Capital contributed during the year \$

Current year net income (loss) \$

Other increase (decrease) (attach explanation) \$

Withdrawals & distributions \$ ()

Ending capital account \$

M Did the partner contribute property with a built-in gain or loss?☐ Yes☒ No

If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction		
13	Other deductions		
14	Self-employment earnings (loss)		
19	Distributions		
20	Other information		

21 ☐ More than one activity for at-risk purposes*22 ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

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Final K-1



Amended K-1

OMB No. 1545-0123

**Schedule K-1
(Form 1065)****2020**Department of the Treasury
Internal Revenue Service

For calendar year 2020, or tax year

beginning

ending

**Partner's Share of Income, Deductions,
Credits, etc.**

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

82-4202620

B Partnership's name, address, city, state, and ZIP code

TRIDENT HOLDINGS LLC (NV)

5580 W DESERT INN RD

Las Vegas, NV 89146

C IRS Center where partnership filed return ▶ e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

Partner: 5

120-66-8659

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

FREDRICK JENKE

1670 RTE 213, APT A

Ulster Park, NY 12487

G ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN

Name

I1 What type of entity is this partner?

Active Individual

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 2.000000% 2.000000%

Loss 2.000000% 2.000000%

Capital 2.000000% 2.000000%

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse \$ \$

Qualified nonrecourse

financing \$ \$

Recourse \$ \$

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account \$

Capital contributed during the year \$

Current year net income (loss) \$

Other increase (decrease) (attach explanation) \$

Withdrawals & distributions \$ ()

Ending capital account \$

M Did the partner contribute property with a built-in gain or loss?☐ Yes☒ No

If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

Part III**Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction		
13	Other deductions		
14	Self-employment earnings (loss)		
19	Distributions		
20	Other information		

21 ☐ More than one activity for at-risk purposes*22 ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

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Final K-1



Amended K-1

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For calendar year 2020, or tax year

beginning

ending

**Partner's Share of Income, Deductions,
Credits, etc.**

▶ See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

82-4202620

B Partnership's name, address, city, state, and ZIP code

TRIDENT HOLDINGS LLC (NV)

5580 W DESERT INN RD

Las Vegas, NV 89146

C IRS Center where partnership filed return ▶ e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

Partner: 6

554-33-9871

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

MARK MIYAOKA

5580 W DESERT INN RD

Las Vegas, NV 89146

G ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN

Name

I1 What type of entity is this partner?

Active Individual

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

Beginning

Ending

Profit 25.000000% 25.000000%

Loss 25.000000% 25.000000%

Capital 25.000000% 25.000000%

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

Beginning

Ending

Nonrecourse \$ \$

Qualified nonrecourse

financing \$ \$

Recourse \$ \$

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account \$

Capital contributed during the year \$

Current year net income (loss) \$

Other increase (decrease) (attach explanation) \$

Withdrawals & distributions \$ ()

Ending capital account \$

M Did the partner contribute property with a built-in gain or loss?☐ Yes☒ No

If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)		
12	Section 179 deduction		
13	Other deductions		
14	Self-employment earnings (loss)		
19	Distributions		
20	Other information		

21 ☐ More than one activity for at-risk purposes*22 ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

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8:14 PM

05/19/21

Accrual Basis

TRIDENT HOLDINGS LLC**Profit & Loss**

January through December 2020

	Jan - Dec 20
Ordinary Income/Expense	
Income	
Cares Act PPP	54,167.00
Total Income	54,167.00
Gross Profit	54,167.00
Expense	
Automobile Expense	259.52
Bad Debit/Losses	37,500.00
Bank Service Charges	361.91
Computer and Internet Expenses	1,490.64
Depreciation Expense	17.98
Fuel	53.23
Household Expenses	7,897.59
Insurance Expense	8,978.65
Interest Expense	143,405.00
License & Permits	3,291.00
Meals	474.36
Medical	250.37
Postage and Delivery	42.77
Repairs and Maintenance	359.40
Security	40.00
Training & Education	149.00
Travel & Lodge	371.74
Utilities	19,863.58
Total Expense	224,806.74
Net Ordinary Income	-170,639.74
Other Income/Expense	
Other Expense	
Ask My Accountant	0.00
Total Other Expense	0.00
Net Other Income	0.00
Net Income	-170,639.74

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05/19/21

Accrual Basis

TRIDENT HOLDINGS LLC**Balance Sheet**

As of December 31, 2020

	Dec 31, 20
ASSETS	
Current Assets	
Checking/Savings	
Checking at B of A - 8523	1,037.73
PPP Trident - 7490	1,200.00
Total Checking/Savings	2,237.73
Other Current Assets	
5580 Desert Inn Rd	1,000,000.00
Greg Hakopiyad	150,000.00
Total Other Current Assets	1,150,000.00
Total Current Assets	1,152,237.73
TOTAL ASSETS	1,152,237.73
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
1909 LLC	19,000.00
Chigaco Steel C/O Rick/Mark	172,319.97
Fredreick Jente	60,000.00
Loan From Rick Saga	19,000.00
Sharron Raa C/O Sophie Ideker	50,000.00
Total Other Current Liabilities	320,319.97
Total Current Liabilities	320,319.97
Long Term Liabilities	
2nd Mortgage 5580 Desert inn	777,743.39
Morgage on 5580 Desert Inn	1,000,000.00
Total Long Term Liabilities	1,777,743.39
Total Liabilities	2,098,063.36
Equity	
Opening Balance Equity	-279,000.00
Retained Earnings	-496,185.89
Net Income	-170,639.74
Total Equity	-945,825.63
TOTAL LIABILITIES & EQUITY	1,152,237.73